NEWTOWN PARKS AND RECREATION SUMMER CAMP STAFF APPLICATION 2008

PLEASE PRINT - FILL OUT COMPLETELY

NAME			PHONE		
ADDRESS					
SCHOOLSt	reet	City	State Zip	::	
ARE YOU OVER 16?	SEX: M/F	SOCIAL SEC	URITY #:		
PARK YOU WISH TO WO	ORK AT: DICKIN	SON:(This	TREADWELL:		
	DAY CA	AMP COUNSE ADVENTURE (st be 21 years old or older LOR (must be 16 years ol COUNSELOR (must be 17 ELOR (must be 16 years	d by June 30, 2008) years old or older	
WHAT AGE GROUP WO Tiny Tots, Kindergarten, 1				at apply.)	
Experience in clubs or other organization Name of Organization: 1			Number of Years:		
2			Number of Ye	ars:	
Previous camp experience:					
Name of camp:		Location:_	Ye	ars worked:	
Have you worked (or volun	teered) for the Parl	ks and Recreati	on Department in the past	t? Yes/No	
If YES, in what capacity?_					
List any Leadership experie	ence?				
Leadership Courses taken:					
Certifications:					
List any experience in instr years old.	ucting or supervisi	ng play of child	ren four (4) to fourteen (1	4)	
List some of your interests:					

IF HIRED, YOU WILL BE EXPECTED TO WORK THROUGHOUT THE SIX-WEEK SUMMER **CAMP (NO Exceptions).**

DAY CAMP DATES
July 7th to July 18th
July 21st to August 1st
August 4th to August 15th

GRADE 5 & 6 CAMP DATES July 7th to July 11th
July 14th to July 18th
July 21st to July 25th
July 28th to August 8th
August 11th to August 15th

TEEN ADVENTURE CAMP
June 30th to July 3rd
July 7th to July 11th
July 14th to July 18th
July 21st to July 25th
July 28th to August 1st

amp Skills (Use <u>one</u> check to indica Games – what kind?				
Hand-crafts – specify:				
Nature-crafts – specify:				
Orienteering				
Photography				
Poetry				
Singing				
Storytelling				
Swimming				
Sketching				
Musical Instrument – specify:				
Tye Dye				
Ice Skating				
BBQ				
Theatre				
Sports – specify:				
Other – specify:				
Name a Theme Day or Week rmission to check references and v	verify information:			
	•			
SIGNATURE OF APPLIC	CANT		DATE	
EFERENCES – Give names, addre	sses and phone number	rs of <u>two</u> people (NO	T relatives).	
Name	City	State	Phone Number	
ow do you know this reference?				
•				
Name	City	State	Phone Number	
ow do you know this reference?	· ·			
•				
SIGNATURE OF APPLICATION OF APPLICAT	APPLICANT DATE			

APPLICATION DUE DATE: APRIL 11, 2008